

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Subject (2)</i>		<i>08-31-01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>LS</i>	<i>1024</i>	<i>10/2/01</i>
RESPONSE FORMALITY REVIEW	<i>M.D.</i>	<i>625</i>	<i>12-13-01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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10/2
5/28/01
12/17/01